



Natural Resources Conservation Service  
6013 Lakeside Boulevard  
Indianapolis, IN 46278

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November 6, 2006

**INDIANA BULLETIN NO. 360-7-1**

**SUBJECT: PER – FEDERAL EMPLOYEES DENTAL AND VISION INSURANCE PROGRAM (FEDVIP)**

**Purpose:** To provide employees with information on the FEDVIP.

**Expiration date:** September 30, 2007

**BACKGROUND**

The Federal Employee Dental and Vision Benefits Enhancement Act of 2004 (P.L. 108-496) directed the U.S. Office of Personnel Management (OPM) to make supplemental dental and vision benefits available to Federal employees, annuitants, and their eligible family members. OPM signed contracts with 10 insurance carriers to provide coverage under the Program.

Seven carriers will offer dental plans:

- Aetna Life Insurance Company
- Comp Benefits
- Government Employees Hospital Association, Inc. (GEHA)
- Group Health, Inc. (GHI)
- MetLife, Inc.
- Triple-S, Inc.
- United Concordia Companies, Inc.

Three carriers will offer vision plans:

- Blue Cross Blue Shield
- Spectera, Inc.
- Vision Service Plan (VSP)

The Program's first open season will be held **November 13 through December 11, 2006**, concurrent with the open seasons for the Federal Employees Health Benefits (FEHB) Program and the Federal Flexible Spending Account Program (FSAFEDS). Eligible employees and annuitants will be able to enroll in FEDVIP during open season. FEDVIP is a voluntary benefits program, like the Federal Long Term Care Insurance Program (FLTCIP) and FSAFEDS. Agencies cannot extend the open season.

**SOURCES OF INFORMATION**

The following sources of information may be helpful to you in learning more about FEDVIP.

- The enrollment website at [www.BENEFEDS.com](http://www.BENEFEDS.com), where you can enroll in FEDVIP. It will also contain links to plans' websites and to OPM's FEDVIP website.

- The FEDVIP website at [www.opm.gov/insure/dentalvision](http://www.opm.gov/insure/dentalvision) where you can get information about the Program including plan rating areas and premiums, a plan comparison tool, and links to plans' websites, plan brochures, and BENEFEDS.com.
- The FEHB Guide, which will be available at [www.opm.gov/insure/health](http://www.opm.gov/insure/health), where you can review a chart comparing FEDVIP plans.

## **FEDVIP VERSUS FEHB**

It's important to understand that FEDVIP and FEHB are entirely separate programs. Some FEHB plans will continue to offer coverage of some dental and vision services. Some also offer non-FEHB dental and vision services. FEDVIP provides supplemental dental and vision insurance coverage. Some carriers participate in both FEHB and FEDVIP.

Individuals eligible to enroll in both programs can choose to enroll in FEHB only, FEDVIP only, both, or neither. They can also choose different enrollment types for each program—enrolling, for example, in Self and Family coverage under FEHB, but Self Only coverage under FEDVIP.

## **ELIGIBILITY**

### **Who's eligible to enroll?**

***Federal and USPS employees.*** Federal and U.S. Postal Service (USPS) employees are eligible to enroll in FEDVIP if they are eligible to enroll in the FEHB Program. It does not matter if you are enrolled in FEHB or not. Eligibility is the key.

Federal/USPS employees enrolled in FEDVIP who subsequently retire on an immediate annuity or for disability under CSRS, FERS, or another retirement system for employees of the Government may continue FEDVIP enrollment into retirement. **There is no 5-year rule for continuing coverage into retirement as there is with the FEHB Program.**

## **ENROLLMENT**

### **What Types of Enrollment are Available:**

**Self Only.** A Self Only enrollment covers only you. You may enroll in Self Only even though you have a family, but the family members are not covered.

**Self Plus One.** A Self Plus One enrollment covers you plus one eligible family member. You may enroll in Self Plus One even though you have more than one eligible family member, but the additional family members are not covered. You must specify during the enrollment process which one eligible family member you wish to cover under a Self Plus One enrollment. You may change the covered family member to another eligible family member during an Open Season or because of a Qualifying Life Event. Please note that a self plus one enrollment is NOT available under the FEHB Program. The FEHB law prohibits such a category.

**Self and Family.** A Self and Family enrollment covers you and all eligible family members. You should list all eligible family members when you enroll through BENEFEDS in order to ensure timely claim payments. All of your eligible family members are automatically covered, even if you fail to list all of them when enrolling on BENEFEDS, but claim payments may be delayed for family members who were omitted.

### ***Different Enrollment Types Allowed for Dental Plans and Vision Plans***

Within FEDVIP, dental insurance plans and vision insurance plans operate completely independently of one another. That means you can enroll for dental insurance only, vision insurance only, neither, or both. If you've enrolled in both, you can choose different enrollment types for each.

#### **When can eligible employees and annuitants enroll?**

You can enroll:

- during the annual open season;
- within 60 days after first becoming eligible as:
  - a new employee,
  - a previously ineligible employee who transferred to a covered position, or
  - a survivor annuitant, if not already covered under FEDVIP;
- within 60 days after returning to service following a break in service of at least 31 days; or within 60 days after a Qualifying Life Event (QLE) that allows enrollment.

#### **How do eligible employees and annuitants enroll or change an enrollment?**

There are two ways for you to enroll or change an enrollment in a dental and/or vision plan in FEDVIP.

1. The primary enrollment method will be the BENEFEDS website ([www.BENEFEDS.com](http://www.BENEFEDS.com)). BENEFEDS.com will contain an online tutorial and an extensive online help and Frequently Asked Questions section (easily navigated by keyword search, index, and table of contents) to assist you through the enrollment process.
2. Alternatively, you can call toll-free 1-877-888-FEDS (1-877-888-3337), TTY 1-877-889-5680, to have a BENEFEDS customer service representative (CSR) enroll you over the telephone.

**\*\*Please note that you cannot enroll in a FEDVIP plan using the Health Benefits Election Form (SF 2809) or through a self-service system, such as Employee Personal Page or Annuitant Express.**

BENEFEDS.com website will “turn on” all enrollment functions by 5:00 a.m. Eastern Time on November 13 and “turn off” open season enrollment functions at midnight Eastern Time on December 11.

The BENEFEDS phone representatives can be reached by phone during the following hours:

#### **Open Season**

9:00 a.m. to 9:00 p.m. Eastern Time, Monday through Friday

9:00 a.m. to 9:00 p.m. Eastern Time, Saturday and Sunday during the last weekend of Open Season (this year, December 9 and 10).

#### **Non-Open Season**

9:00 a.m. to 7:00 p.m. Eastern Time, Monday through Friday.

## **How does the enrollment process work?**

Enrolling is easy, and involves two parts. First, you must create a BENEFEDS.com account, by providing demographic and employment information. When this one-time step is complete, you can compare plans, and enroll. If you enroll in both a dental and vision plan you must complete this second part for each plan. BENEFEDS estimates that it will take no more than 20 minutes to enroll. *Note: once you successfully create a BENEFEDS.com account, you can come back at any time during Open Season to complete enrolling in a dental plan and/or vision plan, or to change plans without having to re-enter demographic and employment information.*

The telephone enrollment process is very similar. You will be issued a username which you will use in subsequent calls or online transactions with BENEFEDS.

## **When do enrollments become effective?**

### ***This Open Season***

The effective date of FEDVIP Open Season enrollments for this very first open season is Sunday, December 31, 2006. You and your covered dependents are considered eligible for services on and after the effective date of coverage.

### ***Canceling an enrollment***

You can cancel your enrollment only during the annual open season (except as noted above). Your family member's coverage also ends upon the effective date of the cancellation.

### ***Re-enrollment***

Like FEHB (but unlike FSAFEDS), re-enrollment is automatic each year unless you choose to make a change during open season or a plan terminates its participation in FEDVIP.

## **PREMIUMS**

Premiums will be deducted from your pay or annuity when possible. Deductions from pay will be on a pre-tax basis (premium conversion) for employees. Deductions from annuity payments will not be on a pre-tax basis for annuitants. For open season enrollments, FEDVIP coverage will be effective December 31, 2006, even though premium deductions will not begin until the pay period that starts on or after January 1, 2007. This gap between the start of coverage and premium payments has already been factored into the FEDVIP premiums.

BENEFEDS is responsible for premium collection for all FEDVIP plans, and has been working closely with agency payroll providers to effect payroll and annuity deductions of FEDVIP premiums. In some cases, however, an enrollee's premium deduction may not occur. This can happen because the enrollee made an error while enrolling--for example, mistyping his social security number. In this case, BENEFEDS will work with agency payroll offices and/or contact the enrollee in order to resolve the error. Sometimes an enrollee's pay or annuity may be insufficient to pay premiums; or an enrollee may go on leave without pay, transfer to another agency, or retire. In cases of insufficient pay or leave without pay, after two consecutive attempts to obtain premium deductions, BENEFEDS will bill the enrollee directly for premiums. Please note that direct payments made to BENEFEDS will be post-tax, so employees will lose the benefit of premium conversion. If an employee has transferred to another agency or retired, BENEFEDS will work with the agency payroll office and the enrollee to establish deductions from the enrollee's new pay/annuity location.

### ***Rating areas***

For dental plans, premiums are determined based on where you live. This is called a rating area. Each dental plan may have up to six rating areas, including an international rate. However, the zip codes included in each rating area differ from plan to plan. Consequently, you could be in rating area 4 under one plan but in rating area 2 under another plan. A chart with the rating areas for each plan is available on the FEDVIP website. BENEFEDS will provide you only the plans and premiums available based on your zip code. It's important to remember that if you move after enrollment you must update your address through BENEFEDS. Your rates might change because of the move.

Vision plans do not have separate rating areas as they each charge a nationwide rate.

### **Key Program-wide Features**

#### ***No pre-existing condition exclusions and waiting periods for orthodontia only***

There is no exclusion for pre-existing conditions for FEDVIP plans. Waiting periods are allowed only for orthodontic services. If a plan has a waiting period, the person receiving the services must be enrolled in the **same plan** for the entire duration of the waiting period, as specified by the plan. Waiting periods satisfied under FEHB plans or other supplemental dental plans cannot be applied toward FEDVIP plans.

#### ***Network Access: Regional versus National***

All of the plans have provider networks. Plans vary according to whether or to what extent they will pay benefits for services provided by a non-network provider. You should study a plan's brochure and provider directory carefully before enrolling.

Regional plans have limited service areas and may require that you receive care from providers who contract with them in order to receive benefits, except for emergencies. If you or a covered family member moves outside of a regional plan's service area, you can change to another plan.

#### ***Coordination of Benefits***

Some FEHB plans already cover some dental and vision services. If a FEDVIP enrollee's FEHB plan does provide any benefits for dental and vision services, the FEHB plan will be the first payor of any benefits. FEDVIP plans are responsible for coordinating benefits with the primary payor.

FEDVIP plans will also coordinate benefit payments with the payment of benefits under other group health benefits coverage enrollees may have and the payment of dental or vision costs under no-fault insurance that pays benefits without regard to fault. They will also coordinate benefits with other group dental or vision insurance, if that information is provided by enrollees.

FEDVIP plans may request that you verify/identify your health insurance plan(s) annually or at the time of service. Please note that if you change your FEHB plan during open season after enrolling on BENEFEDS, you should communicate that change to BENEFEDS. Providing FEHB information may reduce your out-of-pocket costs.

If you have any questions, please contact the Human Resources Section.

/s/

JANE E. HARDISTY  
State Conservationist

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